

**Effective October 1, 2001**

Application or Docket Number

10/020693  
10/020693

(Column 1) \_\_\_\_\_ (Column 2) \_\_\_\_\_

TOTAL CLAIMS	9	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	9 minus 20 =	
INDEPENDENT CLAIMS	6 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

- If the difference in column 1 is less than zero, enter "0" in column 2

(Column 1)	(Column 2)	(Column 3)
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AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA
Total	•	9	Minus	•• 45	= -
Independent	•	1	Minus	••• 3	= -
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

SMALL ENTITY  
TYPE ☐

OTHER THAN  
OR SMALL ENTITY

RATE	FEE		RATE	FEE
BASIC FEE	370.00	OR	BASIC FEE	740.00
X59=		OR	X118=	
X42=		OR	X94=	
+140=		OR	+290=	
TOTAL		OR	TOTAL	940

SMALL ENTITY OR S: ER THAN  
L ENTITY

RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
X\$ 9=		OR	X\$ 10=	—
X42=		OR	X\$ 11=	—
+140=		OR	X\$ 12=	—
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE	—

RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
X\$9=		OR	X\$9=	—
X42=		OR	X42=	—
+140=		OR	+140=	—
TOTAL ADDITIONAL FEE		OR	TOTAL ADDITIONAL FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL	
ADDIT. FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

—If the "Highest Number Previously Paid For" in THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column

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